MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

10/591769

FILING DATE

(FOR USE WITH FORM PTO-875)

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1"AMENDMENT		AFTER 2 MAMENDMENT				AS FILED		AFTER 1" AMENDMENT		AFTER 2 MAMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1					51						
2		1		1				52						ļ
4	-	2		1				53	•					<u> </u>
5		8		1				54 55		 			-	<u> </u>
6		0		1				56		 			-	
7		Ŏ		1				57						
8		0		1				58						
9		0		1				59			·			
10		0		1				60						
11		0		1				61			_			
12		0		1				62			-			
14		6		1				64						
15	· · · · -	Ö		1				65						
16		Ŏ		1	-			66						
17		0	-	1				67		-				
18		0		1				68						1
19		0		1				69						
20		0		1				70						
21	11		1				*	71						
22		1		1				72						ļ
23		1	ļ	1				73				ļ		
24 25		3		1				74		ļ				<u> </u>
26		0		1		 		75 76						
27		l ő		1				77						
28	1		1	-				78				-		-
29		• 1		1				79						
30		2		1				80						
31		0		1			1	81	-					
32		0		1]	82						
33	1		1					83						
. 34		.1		11				84						
35	1	 	1					85						
36 37	1	1	1	1				86 87		-				· · · ·
38	1.		1					88		-				
39		1	1	1				89		 				-
40		2	7-77-5	1	-	(90				1		
41		1		1				91						
42		0		1				92						
43		0		1				93						
44		0		1			le II	94						
45	Ç 15					5		95						
46								96						
47								97						
48							l	98 99		 		-		
50					-			100						-
TOTAL IND.	7	1	7	1	0	I		TOTAL IND.	0	1	0	1	0	1
TOTAL		」 ▼		」 ▼						J .▼		→		J ▼
DEP.	44		37		0			TOTAL DEP.	0		0		0	
CLAIMS	51		44		0			CLAIMS	0		0		0	
PTO - 136	0 (REV. 04/2	(007)		<i>.</i>							TMENT of C rademark Off			